



DEPARTMENTS OF THE ARMY AND THE AIR FORCE  
NATIONAL GUARD BUREAU  
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NGB-ARS

APR 18 2005

MEMORANDUM FOR CHIEFS OF STAFF

SUBJECT: State Identification and Contact of Local and State Mental Health Resources, NGB-ARS Policy Memorandum 05-003

1. References:

a. Memorandum, Assistant Secretary of Defense (HA), 10 March 2005, subject: Post Deployment Health Re-Assessments.

b. Memorandum, USD(P&R), 22 April 2003, subject: Enhanced Post-Deployment Health Assessments.

2. Purpose. The purpose of this memorandum is to provide interim guidance (in lieu of DA policy) and recommendations to States to actively engage in identifying and contacting all available local and State mental health resources. Additionally, to advise States of the upcoming requirement for health re-assessments 90-180 post -integration from deployment.

3. Background. Health concerns following deployments tend to emerge over time. Information from recent field research indicates that health concerns, particularly those involving mental health, are more frequently identified from three to several months following return from an operational deployment. It is critical that members of the Army National Guard are able to take steps to protect and restore (when needed) the overall physical and mental health of our Soldiers.

4. To better ensure early identification and treatment of emerging deployment-related health concerns Dr. Winkenwerder, Assistant Secretary of Defense (Health Affairs) is directing an extension of our post-deployment health assessment program to include a post-deployment re-assessment of general health with a specific emphasis on mental health that will be called the Post Deployment Health Re-Assessment (PDHRA). The PDHRA policy has been released on 10 March 2005, and Army implementation guidance is projected to be available to States/Territories by June 2005.

5. The PDHRA will be offered to all Active Duty and Reserve Component personnel who have completed a Post Deployment Health (PDHA) assessment (the DD Form 2796), between three and six months following their return from deployment. This will be a re-assessment of the Soldier's physical and mental health conditions in all cases, the assessment will be completed prior to the end of the 180 day TRICARE benefit extended to Reserve Component personnel. More than ever, there will be the need to have identified mental health referral resources readily identified in every State.

6. All healthcare is local. The Surgeon's Office has briefed the Deputy State Surgeons, Health System Specialists, the AGR Managers, and the Medical Advisory Council Executive Committee members on the necessity to identify all available local mental health resources, and

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know how to assist Soldiers in obtaining any necessary mental health assistance. It is imperative that mental health resources and shortfalls be identified and contacted now in preparation for support of our Soldiers.

a. Identify and contact mental health resources of Veterans Administration facilities in your area, to include the "store-front" Veterans Centers. Also, the State Director of Veterans Affairs (who is a State employee) can provide information on additional State agencies that may provide mental health services.

b. Identify and contact the mental health resources of TRICARE and the DoD Medical Treatment Facilities (MTFs) in your local area. Separated Soldiers have 180 days of access to the Transitional Assistance Management Program (TAMP) through the TRICARE network and the Local MTFs.

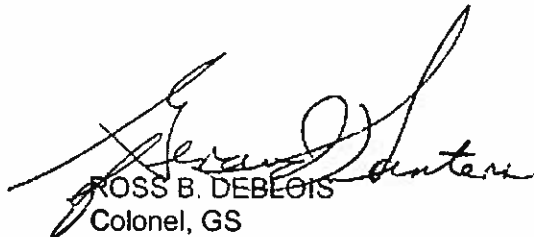
(1) Beneficiary Counseling and Assistance Coordinator have been mandated by Congress NDAA 04. They may be helpful to you, and are explained on this web site, with their locations <http://www.tricare.osd.mil/bcac/>.

(2) TRICARE network providers can be found at <http://www.tricare.osd.mil/>. TRICARE providers can be found by searching zip codes on the TRICARE provider directories.

c. Military One Source contacts can be found at <http://www.militaryonesource.com/> or by calling 1.888.655.4545.

d. Identify and contact the many state mental health agencies and organizations. Local phone directories may have agencies listed in the blue pages.

7. The point of contact is Lieutenant Colonel Diane Brown, Chief, Clinical Services at DSN 327-7143 or 703-607-7143.



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Chief of Staff, Army National Guard

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Each State USPFOs  
Each State POTOS  
Each State Surgeons  
Each State Deputy State Surgeons